FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APF	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2002
Estimated avera	ge burden
hours per respon	nse 16.00

SEC US	E ONLY
Prefix	Serial
DATE RE	CEIVED

Name of Offering (check if thi	s is an amendment and name has changed, and indi	cate change.)
Membership Units		
Filing Under (Check box(es) that app	oly): □ Rule 504 □ Rule 505 ☒ Rule 506 □	Section 4(6) ULGE RECEIVED
Type of Filing: ☐ New Filing ☐	Amendment	
	A. BASIC IDENTIFICATION DA	
1. Enter the information requested al		
Name of Issuer (☐ check if this is	an amendment and name has changed, and indicate	change.)
Arlington Value Management LL		185 497
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
510 16th Avenue, Salt Lake City, I	Jtah 84103	801/532-8811
Address of Principal Business Opera		Telephone Number (Including Area Code)
(if different from Executive Offices)		PROCESSE
Brief Description of Business:	100	
		, nr 1 9 2004
Type of Business Organization		V John Zoo.
☐ corporation	☐ limited partnership, already formed	☑ other (please specify): a Utah limited Habity
☐ business trust	☐ limited partnership, to be formed	company FINANCIAL
•	Month Year	
Actual or Estimated Date of Incorpo	ration or Organization: 1 2 9 9	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Orga	anization: (Enter two-letter U.S. Postal Service abb	reviation for State:
	CN for Canada; FN for other foreign jur	risdiction) U T

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offer-ing, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemp-tion, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (7-00) SaltLake-235499.1 0099999- 000011 of 8



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partner
Full Name (Last name first, Greenhill Financial, LLC (•	ld, Manager/President)			
Business or Residence Addr 510 16th Avenue, Salt Lak	•		ode)		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, Sweazy, John and Kathlee					
Business or Residence Addr 100 Pine Street, 16th Floor		· · · · · · · · · · · · · · · · · · ·	ode)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number an	d Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
		☐ Beneficial Owner	☐ Executive Officer	☐ Director	
Full Name (Last name first,	if individual)			Director	
Check Box(es) that Apply: Full Name (Last name first, Business or Residence Addr Check Box(es) that Apply:	if individual)			□ Director	
Full Name (Last name first, Business or Residence Add	if individual) ress (Number an	d Street, City, State, Zip C	Code)		Managing Partner
Full Name (Last name first, Business or Residence Addr Check Box(es) that Apply:	if individual) ress (Number an Promoter if individual)	d Street, City, State, Zip C ☐ Beneficial Owner	Code) □ Executive Officer		Managing Partner
Full Name (Last name first, Business or Residence Addr Check Box(es) that Apply: Full Name (Last name first, Business or Residence Addr	if individual) ress (Number an Promoter if individual)	d Street, City, State, Zip C ☐ Beneficial Owner	Code) □ Executive Officer		Managing Partner
Full Name (Last name first, Business or Residence Addr Check Box(es) that Apply: Full Name (Last name first,	if individual) ress (Number an Promoter if individual) ress (Number an	d Street, City, State, Zip C Beneficial Owner d Street, City, State, Zip C	Code) Executive Officer Code)	□ Director	Managing Partner General and/or Managing Partner

B. INFORMATION ABOUT OFFERING 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	YES	No
	Ø	
Answer also in Appendix, Column 2, if filing under ULOE.		
2. What is the minimum investment that will be accepted from any individual?\$	\$	None
	Yes	No
3. Does the offering permit joint ownership of a single unit?		\boxtimes
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only		
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
Control Maria De Line III. O Private La Carrie De la		·····
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers	11 0	•
	□ All S	
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[ID] [MO]	
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]	
Full Name (Last name first, if individual)		-
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
Name of Associated Bloker of Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	□ All S	States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]	
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]	
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]	
[RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]	
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
Tune of Associated Broker of Board		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
(Check "All States" or check individual States)	□ All S	. .
([T T]	States
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	[ID]	
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]	
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI]	-	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\preceq\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt 1,170,000 Convertible Securities (including warrants) \$ ____) \$_____\$_ Other (Specify Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors Accredited Investors 655,000 Non-accredited Investors 515,000 Total (for filings under Rule 504 only) N/A \$ Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Type of Security Security Sold Rule 505.... Regulation A Rule 504. Total 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs

4 of 9

.....

Legal Fees

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)

Total

3,000

2,000

5,000

Other Expenses (identify)

C. OFFERING PRICE, NUN	TBER OF INVESTORS, EXPENSES AND	USE C	F PROCEEDS		
b. Enter the difference between the aggregate tion 1 and total expenses furnished in response "adjusted gross proceeds to the issuer."	to Part C - Question 4.a. This difference i	s the		\$_	49,995,000
5. Indicate below the amount of the adjusted grosused for each of the purposes shown. If the amount and check the box to the left of the estimate. The gross proceeds to the issuer set forth in response to	nt for any purpose is not known, furnish an est total of the payments listed must equal the adj	imate			
S. 650 p. 650 at	a z zavo e		Payments to		
			Officers, Directors, &		Payments To
			Affiliates		Others
Salaries and fees		□ \$_	-0-	□ \$_	-0-
Purchase of real estate		□ \$_	-0-	□ \$_	-0-
Purchase, rental or leasing and installation of r	machinery and equipment	□ \$_	-0-	□ \$_	-0-
Construction or leasing of plant buildings and	facilities	□ \$	-0-	S	-0-
Acquisition of other businesses (including the					
offering that may be used in exchange for the	assets or securities of another issuer pursuant		•		•
to a merger)		_		_	-0-
Repayment of indebtedness					
Working capital		□ \$_	-0-	□ \$_	-0-
Other (specify): Investment in Publicly-Trade	ed Securities	□ \$_		⊠ \$_	49,995,000
		-			
Column Totals				⊠ \$_	49,995,000
Total Payments Listed (column totals added) .			⊠ \$4	19,995	<u>,000</u>
	D. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be singe	d by the undersigned duly authorized person	If th	is notice is filed	unde	r Rule 505, the
following signature constitutes an undertaking by the its staff, the information furnished by the issuer to an	issuer to furnish to the U.S. Securities and Ex	change	e Commission, up		
Issuer (Print or Type)	Signature		Date		
Arlington Value Management LLC			October 11, 2	004	
Name of Signer (Print or Type)	Title of Signer (Print or Type)	,			
Greenhill Financial, LLC	Robert Raybould, Manager/President				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes □	No ⊠
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Arlington Value Management, LLC	//// month	October 11, 2004
Name of Signer (Print or Type)	Type of Signer (Print or Type)	
Greenhill Financial, LLC	Robert Raybould, Manager/President	

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	Intend to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA	Х		Membership Units \$15,000			1	\$15,000		X
СО	X		Membership Units \$200,000	1	\$200,000				X
СТ									_
DE			_						
DC									
FL									
GA									
HI									
ID	Х		Membership Units \$50,000	1	\$50,000				Х
IL								-	
IN									
IA ·				· · · · · · · · · · · · · · · · · · ·					
KS									
KY							**************************************		
LA									-
ME									
MD					- 11-11-11				
MA									
MI									
MN									
MS									

APPENDIX

1	:	2	3	4					5
	to non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)			Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
МТ	Х		Membership Units \$125,000	1	\$125,000				X
NE									
NV									
NH									
NJ	Х		Membership Units \$100,000	1	\$100,000				Х
NM									
NY									
NC								:	
ND									!
ОН									
OK		-							
OR									
PA									
RI									
SC									
SD									1
TN									
TX									
UT	X		Membership Units \$680,000	2	\$180,000	6	\$500,000		Х
VT					Mark and the second				
VA								-	
WA									
WV									
WI									

APPENDIX

1		2	3		4				
	}							Disqual	ification
			Type of security					under Sta	ate ULOE
	Intend	l to sell	and aggregate						
ļ	to non-a	ccredited	offering price		Type of investor and				
	investor	s in State	offered in state		amount p	urchased in State		waiver granted)	
	(Part B	-Item 1)	(Part C-Item 1)		(Part C-Item 2)				-Item 1)
				Number of		Number of			
				Accredited		Non-Accredited			
State	Yes	No		Investors	Amount	Investors	Amount	Yes	No
WY									
PR									